

IN THE IOWA DISTRICT COURT FOR POLK COUNTY

<p>PLANNED PARENTHOOD OF THE HEARTLAND, INC., and JILL MEADOWS. M.D.,</p> <p>Petitioners,</p> <p>v.</p> <p>TERRY E. BRANSTAD ex rel. STATE OF IOWA and IOWA BOARD OF MEDICINE,</p> <p>Respondents.</p>	<p>Equity Case No. _____</p> <p>UNOPPOSED MOTION FOR EMERGENCY HEARING ON TEMPORARY INJUNCTION</p>
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COME NOW Petitioners, by and through their undersigned attorneys, and respectfully move for a hearing, on an emergency basis, on their Motion for Temporary Injunctive Relief to stay enforcement of the 72-hour mandatory delay and additional trip requirements of Section 1 of Senate File 471 (“The Act”), to be enacted and made immediately effective upon the Governor’s signature, scheduled to occur on May 5, 2017 at 8:30 a.m., and in support thereof, state as follows:

1. The Act places significant new restrictions and burdens on women seeking abortions in Iowa that currently pose immediate and serious medical risks and consequences, in addition to immediate, ongoing harms to their constitutional and legal rights.
2. The Act requires that women in the state make an additional and medically unnecessary trip to a health center to have an ultrasound and be given certain state-mandated information regarding the abortion procedure, at least 72 hours before they can obtain abortions. The Act thus imposes a medically unnecessary mandatory delay.

3. Physicians who violate the mandatory delay and additional trip requirements are subject to licensee discipline. S.F. 471 § 1 (2017) (to be codified at Iowa Code § 146A.1(3)).
4. All women who have existing appointments to obtain abortions are already immediately restrained from obtaining an abortion according to their scheduled appointment times. Currently, PPH has 44 abortion patients scheduled for Friday, May 5, including 33 medication abortion patients. It also has 11 medication abortion patients scheduled for Tuesday, May 9 and 28 abortion patients scheduled for Wednesday, May 10, including 19 medication abortion patients.
5. For some women, the delays caused by the Act can result in serious medical consequences, including the inability to obtain a medication abortion, requiring them to undergo a surgical procedure instead. Medication abortion is medically indicated for health reasons for some women and is strongly preferred over surgical abortion by others for personal reasons. Medication abortion is more effective the earlier it is initiated, but is only available through 10 weeks dating from the woman's last menstrual period ("LMP"). The delay caused by the Act can push women past the gestational age at which medication abortion is an option. Over the past year, 30% of Petitioner Planned Parenthood of the Heartland's ("PPH") medication abortion patients were in their ninth or tenth week of pregnancy at the time of treatment.
6. Patients who lose the ability to have a medication abortion will be forced to travel significantly farther to get a surgical abortion. That is because PPH only

provides surgical abortion at two of its health centers, which are located in Des Moines and Iowa City; medication abortion is available at five additional health centers, which are spread across the state in Burlington, Cedar Falls, Council Bluffs, Bettendorf (Quad Cities), and Sioux City. Therefore, a patient in Sioux City, for example, who loses her chance to have a local medication abortion will have to travel approximately 400 miles round-trip to Des Moines.

7. The mandatory delay requirement will also result in some women seeking a surgical abortion from being prevented from obtaining an abortion in the state altogether, because the delay will push them past the gestational age at which surgical abortions are available in the state. Surgical abortion is available at PPH's Des Moines health center, and at PPH's Iowa City health center. In the past year, PPH saw thirty patients at its Des Moines clinic who were within two weeks of the gestational age cut-off for surgical abortion there, and seventeen patients at its Iowa City health center who were within two weeks of the cut-off there. These patients will either have to travel out of state to obtain an abortion, or, if they do not have the resources to do so, carry a pregnancy to term.
8. Vulnerable groups of women will also be injured severely by these requirements including low-income women (who are at or below 110% of the federal poverty line), who make up the majority of PPH's abortion patients, as well as victims of sexual assault or domestic abuse, women who have received a diagnosis of a severe fetal anomaly, and women with medical conditions that threaten their health but who do not fall into the narrow medical emergency exceptions stipulated in the Act.

9. The Board of Medicine has yet to promulgate the rules to administer the Act, see S.F. 471 § 1 (2017) (to be codified at Iowa Code § 146A.1(5)), nor has the Department of Public Health produced the materials required by the Act, id. (to be codified at § 146A.1(1)(d), (2)), leaving PPH in the position of lacking critical information about how to interpret the Act.
10. **Upon Petitioners' inquiry, Respondents indicate that, while they do not waive any arguments as to ripeness, they do not oppose Petitioners' Motion for Emergency Hearing to be set on Thursday, May 4, 2017, at such time as the Court deems proper, so that the Court has adequate opportunity to hear arguments by both parties on the merits of Petitioners' Motion for a Temporary Injunction prior to the law taking effect at approximately 8:30 a.m. on Friday, May 5, 2017.**

WHEREFORE the Parties request the Court set this matter for an emergency hearing at such time and date as the Court determines.

Respectfully submitted,

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*Application for admission *pro hac vice* forthcoming